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A Professional Limited Liability Company

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TO:	FROM:
Examir er Michael A. Brown	Howard A. MacCord, Jr.
ORGANIZATION/FIRM:	DATE:
U.S. Patent & Trademark Office	March 11, 2005
FAX NUMBER: (703) 872-9306	RECIPIENT'S PHONE NUMBER: (703) 308-2682
TOTAL # OF PAGES (Including Cover): 8	YOUR E-MAIL ADDRESS:
RE: AMENDMENT in Response to 1/12/ 9/28/01; Confirmation No. 2281; Our	05 Office Action for Serial No. 09/682,624; Filed on Docket No. 7284-001

### NOTES/COMMENTS:

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Examiner: Brown, Michael A.

Art Unit: 3764

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Clayton, Joan

Serial No.: 09/682,624 Filed: September 28, 2001

Confirmation No.: 2281

For: GASTROSTOMY TUBE BAND

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

#### **AMENDMENT**

In response to the Office Action mailed January 12, 2005, please amend the above-identified application as shown.

If any additional fees for the accompanying response are required, Applicant requests that this be considered a Petition therefor. The Commissioner is hereby authorized to charge any additional fees that may be required to Deposit Account 501923.

Listing of Claims begins on page  $\underline{2}$ .

Remarks begin on page 6.